

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	1						51		
2	1						52		
3	1						53		
4		2					54		
5		2					55		
6		3					56		
7		3					57		
8		3					58		
9		3					59		
10		3					60		
11		3					61		
12		3					62		
13		3					63		
14		2					64		
15		2					65		
16		2					66		
17		2					67		
18		2					68		
19		2					69		
20		2					70		
21		3					71		
22		3					72		
23		3					73		
24		3					74		
25		3					75		
26		3					76		
27							77		
28							78		
29							79		
30							80		
31							81		
32							82		
33							83		
34							84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	3						TOTAL IND.		
TOTAL DEP.	60						TOTAL DEP.		
TOTAL CLAIMS	63						TOTAL CLAIMS		